



PAGE 1/6 : RCVD AT 1/18/2005 5:27:21 PM [Eastern Standard Time] : SVR:USPTO-EFAXRF-2/0 : DNS:7464000 : CSID : DURATION (mm-ss):03-18



INTEGRATED DEVICE TECHNOLOGY, INC.  
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## FAX COVER SHEET

TO: <b>ISSUE FEE PAYMENT</b> <b>U.S. P.T.O.</b>	From: <b>Christopher Novak</b> <b>Intellectual Property Counsel</b>
Tel. <b>N/A</b>	Tele: <b>408-330-1576</b>
Fax. <b>(703) 746-4000</b>	Date: <b>January 18, 2005</b>
Sheets: Cover + <u>5</u>	
RE: <u>Issue Fee Payment; Appl. S/N 10/649123 filed 8/27/03, ANNE T. KATZ</u>	

*Message:*

**Please find attached:**

- 1. Part B-Issue Fee Transmittal + Duplicate**
- 2. Change of Correspondence**
- 3. "Fee Address" Indication Form**
- 4. Transmittal Form**

**Thank you.**

**Christopher Novak**  
**Intellectual Property Counsel**  
**Integrated Device Technology, Inc.**  
**2975 Stender Way M/S C4-25**  
**Santa Clara, CA 95054**

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PTO/SB/123 (09-03)

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### CHANGE OF CORRESPONDENCE ADDRESS Patent

Address to:  
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Patent Number	
Issue Date	
Application Number	10/649123
Filing Date	8/27/2003
First Named Inventor	ANNE T. KATZ
Attorney Docket Number	1742A

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I am the:

- ☐ Patentee.
- ☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
- ☒ Attorney or agent of record. Registration Number 42,041

Typed or Printed Name	CHRISTOPHER NOVAK				
Signature					
Date	JAN 04, 2005	Telephone	408-330-1576		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	Application Number	10/649123
	Filing Date	8/27/2003
	First Named Inventor	Katz, Anne
	Art Unit	2813
	Examiner Name	STEPHEN W. SMOOT
Total Number of Pages in This Submission	Attorney Docket Number	1742A

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): "FEE ADDRESS" INDICATION FORM
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	CHRISTOPHER NOVAK, REG. NO. 42,041
Signature	<i>Christopher Novak</i>
Date	JAN 04, 2005

CERTIFICATE OF TRANSMISSION/MAILING	
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.	
Typed or printed name	BROOK KWALICK
Signature	<i>Brook Kwalick</i>
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